	PATENT A	RD		09/110,717												
		CLAIMS AS	(Column 1)		(Column 2)			SMALL TYPE		VTITY	OR	OTHER T				
TOTAL CLAIMS								RAT	Ε	FEE	1	RA	ΓE	FEE	1	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	375.00	OR	BASIC	FEE	750.00	1	
TOTAL CHARGEABLE CLAIMS			minus 20)= *	*			X\$ 9=			OR	X\$1	8=		1	
INDEPENDENT CLAIMS			minus 3 =		*			X42=			OR	X84	34=		1	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140			OR	+28	0=		1	
* If the difference in column 1 is less than zero, enter "0" in column 2								L.		OR	TOT			ł		
17071 (Coldinity) (Coldinity)										ENTITY	OR			THAN		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	PRE	IIGHES IUMBE EVIOU AID FO	R	PRESENT EXTRA		RÁTI	Ε	ADDI- TIONAL FEE		RAT	Έ	ADDI- TIONAL PEE		
	Total	*37	Minus ++(3	7	= \		Xie			OR	Χŧ	/_		1	
	Independent	* 3	Minus ***	(3	21. 419.4	=		Χ. =	=		/OFF	VŽ	/"			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +)=											OR	+	l u		4	
								TOT ADDIT, F				TO ADDIT.	TAL		1	
		(Column 1)	(00	olumr	1 2)	(Column 3)		ADDI1. F	CE	141	8	אטטוו.	FEE		1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	PRE	IIGHES IUMBE EVIOU AID FO	ER JSLY	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE	·	FA1	E	ADDI- TIONAL FEE		
	Total	•	Minus ##			=		X\$	=		OR	X\$	=			
	Independent	*	Minus *** JLTIPLE DEPENDE	ENT	N AILA	=		Χ ′=	:		OR	×	=		1	
<u> </u>	ring) Phese	NATION OF W	JUITLE DEPENDE	ZIVI C) LAINI		ا	+			OR	+	_		1	
								TOT ADDIT. F				T(ADDIT.	OTAL		1	
		(Column 1)	(Co	olumi	n 2)	(Column 3)		NODII. 1				ADUI1.			1	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	PRE	IIGHES IUMBE EVIOU AID FO	R	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		.RA1	E	ADDI- TIONAL FEE		
	Total	•	Minus **			=		X\$	•		OR	X\$	=		1	
	Independent	*	Minus ***			=		Х =				>			1	
L`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		OR	<u> </u>			1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+	: OTAL	· · · · · · · · · · · · · · · · · · ·	-	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box												ADDIT. FEE			

Application or Docket Number